

3-20-01

POSITION	INITIALS	ID #	DATE
<b>FEE DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>		48	3/12/01
<b>FORMALITY REVIEW</b>	55	JCM	03-20-01
<b>RESPONSE FORMALITY REVIEW</b>	M.H	621	05-31-01

**INDEX OF CLAIMS**

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
1	9/19/03
2	2/22/04
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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BECAUSE COPY